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SUMMARY RECORD OF THE 728th MEETING

Held at the Palais Wilson, Geneva,
on Thursday, 27 September 2001, at 3 p.m.

Chairperson: Mr. DOEK

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The meeting was called to order at 3.05 p.m.

CONSIDERATION OF REPORTS OF STATES PARTIES (agenda item 4) (continued)

Initial report of Oman (continued) (CRC/C/78/Add.1; CRC/C/Q/OMA/1; written replies of the Government of Oman to the questions in the list of issues (document without a symbol distributed in the meeting room in English only))

1. At the invitation of the Chairperson, the members of the delegation of Oman resumed places at the Committee table.

2. Mr. SHAHDAD (Oman), replying to questions on the dissemination of the Convention on the Rights of the Child, said that the Ministry of Education, in conjunction with the Ministry of Social Affairs, Labour and Vocational Training and the United Nations Children's Fund (UNICEF), had produced an illustrated booklet explaining the main points of the Convention. The booklet was distributed in schools throughout Oman and teachers had been asked to discuss its contents with their pupils. The booklet was designed to stimulate reflection and contained a short questionnaire to be returned to the Ministry of Education, so that pupils' attitudes could be gauged. One group of students had produced a story with drawings illustrating the provisions of the Convention and that too had been widely distributed in schools. In addition, aspects of the Convention such as non-discrimination were covered in various parts of the curriculum, in particular in social studies, Islamic studies and Arabic lessons at various levels.

3. Non-Omani children were entitled to attend State schools at no cost, but they were of course free to attend private schools, in which case their parents were responsible for all fees.

4. The only punishment allowed in schools was the punishment prescribed by ministerial decree No. 91/99. Any children with a complaint about the way they had been treated could appeal to the parents' committees, which also included some teachers. Those committees had a say in many aspects of school life and could take the complaint to a higher level. Parents in Oman looked very carefully at the slightest punishment meted out to their children and challenged it if they found it unjustified.

5. With regard to children's right to express their opinion, in schools they elected their own class representatives, who had a say in organizing a range of classroom activities and who submitted proposals to the school management team. Children in Oman had ample opportunity both in and out of school to express their views in newspapers, magazines and the broadcast media.

6. Mr. AL-AZRI (Oman) said that the guiding principle in all matters concerning custody of children and payment of maintenance was the best interests of the child. Under Omani legislation, the courts had the right to deduct child maintenance payments from a father's salary. In the case of women who had been married to a foreigner, custody of the child was awarded to the father unless it was in the best interests of the child to stay with the mother. The law provided for visiting rights for the parent not given custody of the child.

7. Ms. AL-HAJRI (Oman) said that Omani law recognized the duty of the State and parents to support children and had special provisions to help children with special needs, such as orphans and illegitimate children. By law, anyone finding an abandoned newborn child had to take the child to the nearest hospital, police station or District Wali, where the necessary steps would be taken to give the child a name and nationality. There were special children's homes for illegitimate children who did not know their parents; such children attended school in the normal way.

8. Children could also be placed in foster homes. Prospective foster parents were visited in advance of placement and periodically afterwards to check that they were in good health and in a position to take proper care of the child. If the child had problems adapting to a family, another foster family was found. The State paid a monthly allowance to the child, and often the foster parents opened a bank account in the child's name and put the money aside for the future. The child could take the name of the foster parents. As for the acceptance of illegitimate children in society, he knew of no reports of any particular problems in that area.

9. Ms. JAFFAR (Oman) said that marriages between close relatives gave rise to recognized health problems, but as half of the marriages in Oman were marriages between relatives the Government had to take a tactful and gradual approach to the issue. The subject was discussed in various school courses and a booklet based on UNICEF materials had been produced for children on a range of topics, including consanguineous marriage. Those topics were discussed from social, religious and health viewpoints in weekly classes and at special workshops. Leaflets were also distributed and counselling services provided in clinics, where people were given answers to their queries on health problems related to consanguineous marriage, such as blood diseases.

10. On the question of birth registration, the medical records of maternity clinics were an important source of data for the Ministry of Health. Also, parents and doctors were under an obligation to notify the authorities of diseases. One of the responsibilities of the medical centres that covered several villages was to register births in their area, as well as to keep track of any vaccinations and medical treatment given to children. The data collected by the Ministry of Health, which covered 95 per cent of the country, had proved to be a very reliable guide to the true situation.

11. Ms. AL-BARWANI (Oman), replying to a question on the legal status of the Convention on the Rights of the Child in Oman, said that domestic legislation took precedence over the Convention but that every effort was being made, including within the framework of the UNICEF Master Plan of Operations (MPO) for Oman, to align that legislation with the provisions of the Convention.

12. There was no national body to which victims of child abuse could complain, but the Ministry of Social Affairs had recently set up a department for family counselling which, once it became operational, would provide expert legal, medical and other advice to families with problems and to other groups such as women's community associations. With regard to rehabilitation and counselling programmes for the victims and perpetrators of child abuse, the

national committee established to follow up implementation of the Convention was concentrating initially on assessing the exact size and nature of the problem before deciding on what action should be taken.

13. With regard to the rights of foreign workers in Oman, under the Basic Statute of the State, foreign workers were entitled to exactly the same services as Omani citizens, including in the area of birth registration.

14. Oman was committed to harmonizing its workforce by giving preference to Omani workers, but it was not jeopardizing the well-being of its citizens or sacrificing the best interests of children in the process. For example, many non-Omani doctors and kindergarten workers were employed, as there was a shortage of qualified Omanis for those jobs.

15. The Ministries of Health and Social Affairs had created a database containing details of individual cases of children with special needs, using information provided by hospitals.

16. The CHAIRPERSON invited the members of the Committee to ask questions concerning basic health and welfare, education and special protection measures.

17. Ms. EL GUINDI requested clarification on custody issues. Were there any cases where the mother could be granted custody of children, or was custody always granted to the father or a member of the father's family? With regard to health, she commended the excellent health care services that were widely available in Oman. Nevertheless, the female mortality rate remained high. She asked whether pregnant women were reluctant to seek medical care. It would also be useful to receive some information, disaggregated by age, about the number of children who received care in centres that catered for their special needs. The traditional practice of marrying close family members sometimes meant that children were born with disabilities. It was unclear whether any campaigns were under way to discourage the practice and whether the Government planned to open advisory offices to address the issue. She asked whether medical examinations before marriage were compulsory, and whether any programmes had been created to integrate children with disabilities into society. Further information was also needed about the penalties given to those who were guilty of breaking laws on child labour. Given the population growth, child labour would be an increasing problem.

18. Ms. OUEDRAOGO, referring to a comment made by the delegation about foreigners who worked in Oman as civil servants, asked what status was given to such workers and their families. Health education in Oman covered a broad range of subjects, but more details were needed about specific programmes that had been implemented to promote breastfeeding. The reporting party should also be more specific about measures that had been implemented to discourage traditional harmful practices, and mention should be made of any resistance that had been encountered. Had any legislation been introduced to prohibit such practices? She failed to understand why HIV/AIDS had not been mentioned in the report. Despite the fact that the epidemic was not a problem in Oman, it would be useful to receive information about the measures taken to inform people about HIV/AIDS, especially young people. The public school system seemed to lack resources, and in order to avoid overcrowding in the classrooms, a system of "shifts" had been adopted. Additional information about the system would be useful, including details of the negative impact it might have.

19. Ms. AL-THANI congratulated the State party on its health system, which ranked highly in a health system performance index prepared by the World Health Organization (WHO). She was surprised, however, by the fact that the mortality rate among newborn babies remained high, especially in remote areas, which could be due to a shortage of trained midwives and nurses. Home births, which posed more of a risk than hospital births, were still practised. Health centres to cater for the special needs of newborn babies should perhaps be provided. It would also be interesting to know whether any programmes existed to promote the integration of children with special needs into mainstream schools and into society in general, and whether teachers and volunteers working with children with special needs received specific training.

20. The Government did not plan to make schooling compulsory, yet drop-out rates seemed to be fairly high. In some Gulf countries, education was not a priority for many families living in rural areas. Was the situation similar in the case of Oman?

21. Ms. TIGERSTEDT-TÄHTELÄ noted that, according to article 28 of the Convention, primary education should be made compulsory and available free to all. She would welcome a definition of the family. She would also be interested to know what status was given to single mothers and their children, and whether they were entitled to child benefits. If a mother was unable to provide sufficient financial support for her child, would the child be taken away from her? The issue of proof of fatherhood required further clarification. She had understood that the fatherhood of unmarried men was not recognized by law, yet paragraph 106 of the report stated that proof of fatherhood through legitimate means was sufficient for establishing the child's right to support from the person responsible for the support. If a single mother could prove the father's identity, would he be obliged to pay support for the child? She asked whether the notion of joint custody existed in Oman, whereby following a divorce, both parents had to discuss important issues relating to their child. The issue of naming orphans also required further clarification. Alternative families were entitled to give a name to an orphaned child placed in their care, but what name did the child use prior to that? Further problems would arise if the child was not suited to the family and was moved to another home.

22. Ms. CHUTIKUL said that additional information was needed about mental health services for children and their families. The report mentioned that steps were being taken to assist teachers to understand individual differences among various student groups. She would like to know what programmes were available to gifted children and children with learning difficulties. Further details would also be appreciated about whether sex education and human rights education were included on the curriculum, and how they were addressed.

23. Mr. AL-SHEDDI, while recognizing that Oman had been making an effort to produce tangible results, said that further improvements could be made in the education sector. He failed to understand why fewer girls than boys received primary education. Illiteracy rates were also higher among girls. He asked whether any policies were being implemented to remedy that disparity. What reasons could be given to account for the fact that children dropped out of school? Many problems at school arose because of problems at home, and parents with a low level of education were often unable to address the problems faced by their children. Illiteracy was one such example. It would be useful to know whether any measures were being taken to ensure that children were protected within the family environment.

24. Mr. CITARELLA said that malnutrition was an issue of great concern. According to estimates by the Ministry of Health and UNICEF, 25 per cent of children under the age of five were suffering from malnutrition. Further information was needed about how the situation was being addressed. With regard to primary school education, it appeared from the written replies that the discrepancy between attendance of boys and girls also varied from district to district, which suggested discrimination based on the economic conditions of the region. He recommended that a plan should be introduced to encourage girls in all districts to go to school.

25. The minimum age of criminal responsibility was very low, being set at nine years. Several cases had been reported of children between the ages of 12 and 15 receiving prison sentences. A Draft Juveniles Law was being prepared to introduce specialized juvenile police, penalties alternative to deprivation of liberty and social reintegration services, among other things. How soon would the Draft Law be implemented to improve the situation of juvenile justice?

26. Ms. OUEDRAOGO asked whether the Government had encountered any resistance to its campaign to inform mothers about the positive effects of birth spacing, given the Islamic beliefs of the people.

27. Ms. TIGERSTEDT-TÄHTELÄ, referring to a comment made in the written replies about private sectors contributing to the financing of the education sector in Oman, asked whether the Government cooperated with private sectors in other fields, such as the health sector. Could the State party provide an evaluation of the cooperation with the private sector? What type of private sector institutions were involved?

28. The CHAIRPERSON, referring to statistics provided in the National Report on the Follow-up to the World Summit for Children 2000, expressed concern about the discrepancy between the number of disabled children under the age of 15 and the number of those who were actually receiving care in rehabilitation centres. He would welcome information about any measures being taken by the Government to provide care for all disabled children, including programmes to integrate such children into mainstream schools. Further details about the role of non-governmental organizations (NGOs) in developing programmes for disabled children would also be useful.

29. He welcomed the fact that Oman had ratified the ILO Worst Forms of Child Labour Convention, 1999 (No. 182) and had endorsed accompanying Recommendation 190, and would appreciate further details of the policies that were being implemented in that regard. Finally, further information was requested about measures taken to prevent the use of young children in camel racing, which was an issue of great concern to the Committee.

The meeting was suspended at 4.15 p.m. and resumed at 4.40 p.m.

30. Ms. JAFFAR (Oman) said that the Ministry of Health provided mother and child health care throughout the country, covering about 95 per cent of the population. Under the health care programme started in 1987, pre- and post-natal care was provided for women as well as care for newborn babies and infants up to school age. The programme was one of the most successful of its kind in terms of the extensive coverage it offered; in 2000, there had been 100 per cent

coverage for post-natal care. Therefore, the maternal mortality rates cited by some international organizations were exaggerated. A ministerial declaration had been issued requiring every death of a pregnant woman or woman in childbirth to be reported to the relevant authorities within 48 hours, in an effort to improve services and to avoid such incidents recurring. The relevant authorities had submitted to WHO a written rebuttal of that organization's figures relating to maternal mortality in Oman.

31. Clear indicators existed with regard to spacing between pregnancies. High fertility rates admittedly posed a problem for the State party; however, a new mother and child service had been instituted in the Gulf in 1994; it included campaigns to raise awareness of the need for good health practices during pregnancy, with services being offered to families free of charge. The campaigns were directed at both men and women as it was recognized that men had a decisive role to play in the spacing of children. It should be noted, however, that the objectives of the birth spacing campaign related more to health issues than demographic issues.

32. The CHAIRPERSON asked whether there had been any resistance to the programme in view of the sensitive nature of the issue.

33. Ms. JAFFAR (Oman) said that the measure was aimed simply at spacing pregnancies and was not a family planning measure; while Islam prohibited family planning it was not against birth spacing. Contraceptive use, which had risen from 12 per cent in 1994 to 40 per cent in 1997, had contributed to a reduction in fertility rates, from 6.9 per cent in 1993 to 4.7 per cent at the end of 2000.

34. As to why the infant mortality rates were so high despite the extensive health coverage, she said that the infant mortality rate was related to infectious diseases and that a programme had been established to arrest the problem. Other difficulties related to congenital anomalies seemed to have arisen, but the Ministry of Health had embarked on a five-year plan to lower mortality rates and generally improve the situation. Malnutrition was another source of concern. According to the Gulf Family Health Survey, Oman had a malnutrition rate of 23 per cent, which was very high. In 1999, therefore, a field study had been carried out to verify those figures, based on a sample of 80,000 children of both sexes; according to its findings the malnutrition rate did not exceed 18 per cent. A significant number of nutrition and baby-friendly initiatives had been launched to counter malnutrition and reduce vitamin and other deficiencies, especially for pre-school children; however, the reasons for the high malnutrition rates in the Sultanate had still not been determined. It was hoped that a study to be undertaken in 2002 would shed some more light on the problem.

35. A successful breastfeeding programme had been launched in 1992 in cooperation with UNICEF. It had set out 10 requirements for hospitals to earn the title "baby-friendly" and she was pleased to say that all hospitals in Oman had done so by the end of 1994. A law aimed at reducing the marketing of powdered milk and promoting breastfeeding had been enacted in 1992, with the result was that breastfeeding was chosen in 70 per cent of cases.

36. On the question of adolescent sexuality, a booklet prepared jointly by the Ministry of Health and the Ministry of Education addressed some 22 topics, including HIV/AIDS, sexually transmitted diseases, cancer and mental health. Students had received instruction on those

subjects over a period of one year, at the end of which they had been asked to prepare a research paper on one of the topics, under the guidance of their teachers. A competition had then been held and the three best papers in the whole Sultanate selected. In 2001, a survey had been conducted to determine students' knowledge about topics such as smoking, drug abuse, nutrition and exercise. The ministry intended to use the results of that survey to draw up programmes in accordance with the needs identified.

37. Oman's problems relating to HIV/AIDS were similar to those of other countries. When the HIV/AIDS programme had begun, in 1983, it had been discovered that the existing cases had been linked to blood transfusions using blood imported from outside the Sultanate, a practice that had been subsequently stopped. All blood donations were screened and tested before use. Most of the new HIV/AIDS cases reported pre-dated the discontinuation of imported blood. In other cases, the disease had been transmitted through sexual contact. Pregnant women were not screened for the disease unless the woman's medical history warranted it. Youth in schools, universities and other institutions as well as prison inmates were targeted for awareness-raising campaigns sponsored by various ministries, including the Ministry of Health and the Ministry of Social Affairs, Labour and Vocational Training. Friday prayers were also used as a time for teaching young people what Islam had to say about HIV/AIDS and sexually transmitted diseases.

38. Mr. SHAHDAD (Oman) said that human rights and children's rights issues were included in the school curricula. Replying to the question about children with learning difficulties, he said that specific programmes had been introduced into teacher training colleges to equip teachers to deal with children with special needs. Some State schools already had facilities to integrate children with disabilities, including the visually impaired. There were even boarding schools to accommodate students who lived in the outlying areas; other students with special needs were sent abroad for specialist studies. The Ministry of Social Affairs, Labour and Vocational Training remained convinced that students with disabilities should attend ordinary schools, especially in the urban areas, which would facilitate their full integration into society.

39. It was true that school attendance figures were lower for girls than boys, but efforts had been made, with success, to narrow the gap, especially in primary and secondary education. With regard to regional disproportionality in terms of gender, in both the Muscat and the Al Wusta regions, there were more boys than girls attending school. However, it should be borne in mind that Oman had different climatic conditions in different parts of the country, in addition to having nomadic populations. Therefore, education was less of a priority in particular regions for some groups. However, the efforts of the Government and other players were aimed at full school attendance by all children of school age. Initially, rather than turn back students for lack of space, a shift system had been created using existing buildings so as to ensure maximum school attendance, and night classes had even been introduced. However, school construction was now being envisaged to enable students to attend school all day.

40. Failure at school and drop-outs were closely related. In the past two years, it had been decided to adopt a system of continuous assessment, and it was hoped that those problems would be resolved in the near future. In primary school, children did not repeat the school year in the event of failure, hence they did not face stressful interview examinations where their future hinged on their performance. It was planned to extend the continuous assessment system through the age of 16. As for teacher training, many educators came from abroad and had

specialist qualifications. Omani teachers often attended teacher training courses in other countries. Considerable support had been provided by UNICEF to raise the level of teaching in the private sector.

41. Ms. AL-LAMKI (Oman) said that in cases of divorce or separation, custody of the child was given to the mother, provided that was in the best interests of the child. If it was not, custody was given to the father or the maternal grandmother, in that order.

42. Ms. EL GUINDI asked whether guardianship was given to a mother in the case of a father's death, or whether it must be given to a man.

43. Mr. AL-AZRI (Oman) said that in such cases it was necessary to distinguish between two aspects: custody of the child on the one hand, and responsibility for the child's property or assets on the other. The latter was always given to the father or another man.

44. Ms. AL-LAMKI (Oman) said that as long as married people lived together, they held joint responsibility for the upbringing of the child. However, there were no provisions for joint custody in cases of divorce. Divorced parents who did not have custody generally had visitation rights. There was no definition of the family per se in Omani law. However, according to the personal status law, the establishment of a stable family was the purpose of marriage. It could thus be deduced that the law only recognized families when they were based on marriage: the legislation did not refer to unmarried women and their children as families. In Oman, the Constitution was based on Islamic law, which did not tolerate adultery or fornication. Requiring the father of an illegitimate child to provide financial support, would thus run counter to the law. There were criminal provisions against both men and women who committed adultery or fornication. A woman who delivered an illegitimate child thus risked prosecution if she tried to prove paternity, because she would in effect be admitting that she had committed a crime.

45. Foreigners enjoyed protection of their persons and property under the law, and were entitled to engage in litigation. They were also free to practice their religion according to recognized customs, provided their practices did not interfere with public order. Those who lived in Oman for 20 years without any interruptions exceeding 60 days could apply for Omani nationality, and foreigners were regularly naturalized. The children of foreigners living in Oman were entitled to stay with their parents up to the age of 28, provided they did not work. If they wished to seek employment, they had to apply for a different visa.

46. While the age of criminal responsibility was admittedly low, child offenders between the ages of 9 and 13 were never imprisoned. Juvenile offenders, even up to the age of 18, were usually handed over to their parents or guardians on bond, whereby the adult ensured that the child offender did not commit another offence. In the event of recidivism, the parents or guardians were considered to have failed in their responsibility and were held liable to a penalty for abandonment of the child. The juvenile law bill had been referred to different ministries for comment and revision, and was currently being finalized by policy makers.

47. Ms. MOOSA (Oman) replying to a question by Mr. Al Sheddi, said that a Better Parenting Initiative programme was being carried out by the Ministry of Social Affairs, Labour and Vocational Training, UNICEF and the Ministry of Health. Its objective was to teach

parents, in particular young parents, how best to meet the emotional, educational and developmental needs of their children, for example by involving fathers in the provision of childcare. Parents were encouraged to avoid reliance on childcare institutions, as there were currently insufficient numbers of day-care centres in Oman.

48. Ms. AL-BARWANI (Oman) said that illegitimate children were given personal names immediately at birth, either at the hospital or on registration with the Ministry of Social Affairs, Labour and Vocational Training. Their patronymics would be coined names, and would always begin with the prefix Abdallah. It was for the family concerned to decide whether to give the child their own qabila, or tribal name. Once a child received a qabila, he or she was entitled to retain it, notwithstanding any future problems with the family.

49. In the past 10 years there had been a great deal of private sector contributions to social services, including health care, the construction of health facilities and medical training. Contributions from the private sector had built and covered the running costs of all the country's 14 centres for the disabled.

50. In June 2001 Oman had signed the ILO Worst Forms of Child Labour Convention, 1999 (No. 182). The Government was still establishing the necessary infrastructure to bring the country's law and practice into line with that instrument. In Oman, camel riding was considered a sport, not a job, and the participation of children in it was a source of pride for both the children and their parents. A brief survey carried out earlier in the year had concluded that child riders were all Omani, were well treated and attended school.

51. Ms. AL-THANI suggested that the Government should consider conducting a study into the dangers faced by child camel riders and the prevalence of injuries among them.

52. Ms. EL GUINDI thanked the delegation for engaging in a constructive dialogue and summarized the Committee's conclusions. The question of reservations must be reconsidered, as the implementation of the Convention must not be undermined. The National Committee for the Care of Children should be given greater influence and more resources. Because the latest census had been carried out in 1993, there was a lack of demographic information which was required for the proper implementation of the Convention. The State party should collect data disaggregated by gender and by rural and urban areas so as to provide an accurate picture of the situation of children and to determine priorities.

53. Current legislation must be revised, including the definition of childhood, and specialists, including policemen and families, must be trained in issues involving children. The Government should consider changing the application of the criminal code in cases involving minors. Greater opportunities must be ensured for girls, in particular those living in rural areas. More equitable and healthy marriage practices should be encouraged, including medical examinations before marriage. Mother and child health care should be promoted more intensely, and the State party should ratify the ILO Minimum Age Convention, 1973 (No. 138).

54. The CHAIRPERSON called on the delegation to transmit to the Government the Committee's request that States parties should accept the amendment of article 43 of the Convention, aimed at increasing the number of members of the Committee from 10 to 18.

55. Ms. AL-BARWANI (Oman) thanked the Committee members for their comments and suggestions. The stimulating and useful exchange of views would be a valuable guide for the Omani Government as it carried out programmes for children. Several issues needed to be tackled, and the authorities were determined to work vigilantly to ensure that the rights of their children were preserved.

The meeting rose at 5.45 p.m.